

FRAUD REFERRAL TO THE BUREAU OF INVESTIGATION

State Form 48815 (R / 8-01) / FI 0013

See instructions on the reverse side.

Name of recipient		County		County number
		Date referred		☐ 10 Days ☐ 30 Days
Address (number and street, city, state, ZIP code)		ICES number		F.I.S.T. number
		Social Security number		Date of birth (month, day, year)
		Recipient telephone number		
Name of caseworker ID		C.W. telephone number		
Case status:			dress?	Prior investigated ICES case numbers
Programs involved: Food Stamps TANF Medicaid Hoosier Healthwise Child Care				
Name of absent parent (if applicable) Name of landlord		Landlord's telephone number		
Signature of Fraud Referral Coordinator	I.D. number		FRC telephone number	
Detailed summary of what is suspect and what specifically is being requested of the investigator to find. (Attach another page if necessary.)				
PLEASE ATTACH AEICI, AEIID, CLRC AND ALL OTHER RELEVANT SCREENS				
Assigned SI	, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	Supervisory SI initials		Date assigned (month, day, year)
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INSTRUCTIONS FOR REFERRING CASES TO THE BUREAU OF INVESTIGATION

The following steps must be taken before a case can be referred to the Bureau of Investigation:

1. Factual Basis for Suspicion

The worker writes a summary describing how the worker thinks the client is committing fraud. Workers should include a description of the facts supporting their suspicion.

2. Making a Referral

When making the referral, the worker should include the following:

- A completed referral sheet.
- An AEIID, AEICI, and IQCP printouts.
- Copies of other information the worker deems relevant such as landlord name and telephone number, absent parent information, and / or name and address of unreported employer.
- 3. Please send all referrals to your local county Fraud Referral Coordinator (FRC). After approval, the FRC will forward the referral to the Bureau of Investigation.